

1.) CORPORATION NAME:

Braun Intertec Corporation

DUE DATE: **12/30/2010**

SCC ID NO: **F1809963**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **B.E.**

AUTH IN VI

CORPORATION SERVICE COMPANY

11 S 12TH ST

RICHMOND, VA 23218

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	1,000,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:

MN

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 11001 HAMPSHIRE AVE S

CITY/ST/ZIP: MINNEAPOLIS, MN 55438-

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME: MARK A PAYNE
TITLE: DIRECTOR
ADDRESS: 8860 FLESHER CIRCLE
CITY/ST/ZIP/CO: EDEN PRAIRIE, MN 55347-

☐

OFFICER

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DIRECTOR

NAME: ROBERT J JANSSEN
TITLE: PRESIDENT
ADDRESS: 1826 BUERKLE ROAD
CITY/ST/ZIP/CO: ST PAUL, MN 55110-

☒

OFFICER

☐

DIRECTOR

NAME: JODI D NORMAN
TITLE: SECRETARY
ADDRESS: 1826 BUERKLE RD
CITY/ST/ZIP/CO: ST. PAUL, MN 55110-

☒

OFFICER

☐

DIRECTOR

NAME: JON A CARLSON
TITLE: CEO
ADDRESS: 11001 HAMPSHIRE AVENUE SOUTH
CITY/ST/ZIP/CO: MINNEAPOLIS, MN 55438-

☒

OFFICER

☒

DIRECTOR

NAME: GEORGE KLUEMPKE
TITLE: VICE PRESIDENT
ADDRESS: 11001 HAMPSHIRE AVENUE SOUTH
CITY/ST/ZIP/CO: MINNEAPOLIS, MN 55438-

☒

OFFICER

☒

DIRECTOR

NAME:	STEVEN P NAGLE	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	526-10TH STREET NE #300		
CITY/ST/ZIP/CO:	WEST FARGO, ND 58504-		
NAME:	GERALD FLODEN	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	3124 TIMBERLINE CIR S		
CITY/ST/ZIP/CO:	FARGO, ND 58104-		
NAME:	DANIEL R HOLTE	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	11001 HAMPSHIRE AVE S		
CITY/ST/ZIP/CO:	MINNEAPOLIS, MN 55438-		
NAME:	ANN M SCHRADER	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	HEALTHEAST		
CITY/ST/ZIP/CO:	559 CAPITOL BLVD ST. PAUL, MN 55103-		
NAME:	MICHAEL THYKEN	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	8859 FLESHER CIR		
CITY/ST/ZIP/CO:	EDEN PRAIRIE, MN 55347-		
NAME:	MICHAEL L BRATRUD	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	11001 HAMPSHIRE AVE S		
CITY/ST/ZIP/CO:	MINNEAPOLIS, MN 55438-		
NAME:	CHARLES R BRENNER	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	11001 HAMPSHIRE AVE S		
CITY/ST/ZIP/CO:	MINNEAPOLIS, MN 55438-		
NAME:	MICHAEL M HEUER	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	11001 HAMPSHIRE AVE S		
CITY/ST/ZIP/CO:	MINNEAPOLIS, MN 55438-		
NAME:	RAY A HUBER	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	11001 HAMPSHIRE AVE S		
CITY/ST/ZIP/CO:	MINNEAPOLIS, MN 55438-		
NAME:	GREGG R JANDRO	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	11001 HAMPSHIRE AVE S		
CITY/ST/ZIP/CO:	MINNEAPOLIS, MN 55438-		

NAME: CARMEN M BORGESON TITLE: Acting CFO ADDRESS: 11001 HAMPSHIRE AVE S CITY/ST/ZIP/CO: MINNEAPOLIS, MN 55438-	<input checked="checked" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR						
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.							
<table style="width: 100%; border: none;"> <tr> <td style="width: 33%; border-bottom: 1px solid black;">/s/ JODI D NORMAN</td> <td style="width: 33%; border-bottom: 1px solid black;">JODI D NORMAN, SECRETARY</td> <td style="width: 33%; border-bottom: 1px solid black;">12/22/2010</td> </tr> <tr> <td style="text-align: center; font-size: small;">SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT</td> <td style="text-align: center; font-size: small;">PRINTED NAME AND CORPORATE TITLE</td> <td style="text-align: center; font-size: small;">DATE</td> </tr> </table>		/s/ JODI D NORMAN	JODI D NORMAN, SECRETARY	12/22/2010	SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE
/s/ JODI D NORMAN	JODI D NORMAN, SECRETARY	12/22/2010					
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE					
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.							